

UNITED STATES DISTRICT COURT
for the
Eastern District of Michigan

Liberty Mutual Fire Insurance Company, et al.)	
)	
<i>Plaintiff,</i>	)	Civil Action No. 2:19-cv-12648-DML-RSW
)	
v.)	
)	
	)	Hon. David M. Lawson
Relief Physical Therapy & Rehab, Inc. d/b/a Relief Rehab, et al.)	
)	
<i>Defendant.</i>)	

SUMMONS IN A CIVIL ACTION

To: Ali Merhi
7001 Wyoming, Suite 8
Dearborn, MI 48126

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Jacquelyn A. McEttrick, Esq., Smith & Brink, P.C., 350 Granite St., Suite 2303, Braintree, MA 02184

If you fail to respond, judgment by default may be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

DAVID J. WEAVER, CLERK OF COURT

By: _____
Signature of Clerk or Deputy Clerk

Date of Issuance: _____



Summons and Complaint Return of Service

Case No. _____

Hon. _____

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

This summons for *(name of individual and title, if any)* _____
 was received by me on *(date)* _____.

☐ I personally served the summons on the individual at *(place)* _____
 _____ on *(date)* _____; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* _____
 _____, a person of suitable age and discretion who resides there,
 on *(date)* _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* _____, who is
 designated by law to accept service of process on behalf of *(name of organization)* _____
 _____ on *(date)* _____; or

☐ I returned the summons unexecuted because _____; or

☐ Other *(specify)*: _____
 _____.

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ _____.

I declare under penalty of perjury that this information is true.

Date: _____

Server's signature

Printed name and title

Server's address

Additional information regarding attempted service, etc:

UNITED STATES DISTRICT COURT
for the
Eastern District of Michigan

Liberty Mutual Fire Insurance Company, et al.)	
)	
<i>Plaintiff,</i>	)	Civil Action No. 2:19-cv-12648-DML-RSW
)	
v.)	
)	
	)	Hon. David M. Lawson
Relief Physical Therapy & Rehab, Inc. d/b/a Relief Rehab, et al.)	
)	
<i>Defendant.</i>)	

SUMMONS IN A CIVIL ACTION

To: Ameer Awada
8535 Gary Street
Dearborn, MI 48126

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Jacquelyn A. McEttrick, Esq., Smith & Brink, P.C., 350 Granite St., Suite 2303, Braintree, MA 02184

If you fail to respond, judgment by default may be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

DAVID J. WEAVER, CLERK OF COURT

By: _____
Signature of Clerk or Deputy Clerk

Date of Issuance: _____



Summons and Complaint Return of Service

Case No. _____

Hon. _____

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

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☐ I left the summons at the individual's residence or usual place of abode with *(name)* _____
 _____, a person of suitable age and discretion who resides there,
 on *(date)* _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* _____, who is
 designated by law to accept service of process on behalf of *(name of organization)* _____
 _____ on *(date)* _____; or

☐ I returned the summons unexecuted because _____; or

☐ Other *(specify)*: _____
 _____.

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ _____.

I declare under penalty of perjury that this information is true.

Date: _____

Server's signature

Printed name and title

Server's address

Additional information regarding attempted service, etc:



Summons and Complaint Return of Service

Case No. _____

Hon. _____

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 was received by me on *(date)* _____.

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☐ Other *(specify)*: _____
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Server's address

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Summons and Complaint Return of Service

Case No. _____

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☐ I left the summons at the individual's residence or usual place of abode with *(name)* _____
 _____, a person of suitable age and discretion who resides there,
 on *(date)* _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* _____, who is
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☐ I returned the summons unexecuted because _____; or

☐ Other *(specify)*: _____
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I declare under penalty of perjury that this information is true.

Date: _____

Server's signature

Printed name and title

Server's address

Additional information regarding attempted service, etc:

UNITED STATES DISTRICT COURT
for the
Eastern District of Michigan

Liberty Mutual Fire Insurance Company, et al.)	
)	
<i>Plaintiff,</i>	)	Civil Action No. 2:19-cv-12648-DML-RSW
)	
v.)	
)	
	)	Hon. David M. Lawson
Relief Physical Therapy & Rehab, Inc. d/b/a Relief Rehab, et al.)	
)	
<i>Defendant.</i>)	

SUMMONS IN A CIVIL ACTION

To: First Step Rehab, Inc.
c/o Imad Awada, Registered Agent
7455 Greenfield Rd., Detroit, MI 48228

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Jacquelyn A. McEttrick, Esq., Smith & Brink, P.C., 350 Granite St., Suite 2303, Braintree, MA 02184

If you fail to respond, judgment by default may be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

DAVID J. WEAVER, CLERK OF COURT

By: _____
Signature of Clerk or Deputy Clerk

Date of Issuance: _____



Summons and Complaint Return of Service

Case No.
Hon.

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

This summons for *(name of individual and title, if any)* _____
was received by me on *(date)* _____.

☐ I personally served the summons on the individual at *(place)* _____
_____ on *(date)* _____; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* _____
_____, a person of suitable age and discretion who resides there,
on *(date)* _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* _____, who is
designated by law to accept service of process on behalf of *(name of organization)* _____
_____ on *(date)* _____; or

☐ I returned the summons unexecuted because _____; or

☐ Other *(specify)*: _____
_____.

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ _____.

I declare under penalty of perjury that this information is true.

Date: _____

Server's signature

Printed name and title

Server's address

Additional information regarding attempted service, etc:

UNITED STATES DISTRICT COURT
for the
Eastern District of Michigan

Liberty Mutual Fire Insurance Company, et al.)	
)	
<i>Plaintiff,</i>	)	Civil Action No. 2:19-cv-12648-DML-RSW
)	
v.)	
)	
	)	Hon. David M. Lawson
Relief Physical Therapy & Rehab, Inc. d/b/a Relief Rehab, et al.)	
)	
<i>Defendant.</i>)	

SUMMONS IN A CIVIL ACTION

To: Five Star Comfort Care LLC
c/o Joseph Awada, Registered Agent
7001 Wyoming, Suite 8 Dearborn, MI 48126

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Jacquelyn A. McEttrick, Esq., Smith & Brink, P.C., 350 Granite St., Suite 2303, Braintree, MA 02184

If you fail to respond, judgment by default may be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

DAVID J. WEAVER, CLERK OF COURT

By: _____
Signature of Clerk or Deputy Clerk

Date of Issuance: _____



Summons and Complaint Return of Service

Case No.
Hon.

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

This summons for *(name of individual and title, if any)* _____
was received by me on *(date)* _____.

☐ I personally served the summons on the individual at *(place)* _____
_____ on *(date)* _____; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* _____
_____, a person of suitable age and discretion who resides there,
on *(date)* _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* _____, who is
designated by law to accept service of process on behalf of *(name of organization)* _____
_____ on *(date)* _____; or

☐ I returned the summons unexecuted because _____; or

☐ Other *(specify)*: _____
_____.

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ _____.

I declare under penalty of perjury that this information is true.

Date: _____

Server's signature

Printed name and title

Server's address

Additional information regarding attempted service, etc:

UNITED STATES DISTRICT COURT
for the
Eastern District of Michigan

Liberty Mutual Fire Insurance Company, et al.)	
)	
<i>Plaintiff,</i>	)	Civil Action No. 2:19-cv-12648-DML-RSW
)	
v.)	
)	
	)	Hon. David M. Lawson
Relief Physical Therapy & Rehab, Inc. d/b/a Relief Rehab, et al.)	
)	
<i>Defendant.</i>)	

SUMMONS IN A CIVIL ACTION

To: Great Lakes Professional Services, LLC
c/o Magdalene Awada, Registered Agent
1911 Hawthorne St., Dearborn, MI 48128

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Jacquelyn A. McEttrick, Esq., Smith & Brink, P.C., 350 Granite St., Suite 2303, Braintree, MA 02184

If you fail to respond, judgment by default may be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

DAVID J. WEAVER, CLERK OF COURT

By: _____
Signature of Clerk or Deputy Clerk

Date of Issuance: _____



Summons and Complaint Return of Service

Case No.
Hon.

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

This summons for *(name of individual and title, if any)* _____
was received by me on *(date)* _____.

☐ I personally served the summons on the individual at *(place)* _____
_____ on *(date)* _____; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* _____
_____, a person of suitable age and discretion who resides there,
on *(date)* _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* _____, who is
designated by law to accept service of process on behalf of *(name of organization)* _____
_____ on *(date)* _____; or

☐ I returned the summons unexecuted because _____; or

☐ Other *(specify)*: _____
_____.

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ _____.

I declare under penalty of perjury that this information is true.

Date: _____

Server's signature

Printed name and title

Server's address

Additional information regarding attempted service, etc:

UNITED STATES DISTRICT COURT
for the
Eastern District of Michigan

Liberty Mutual Fire Insurance Company, et al.)	
)	
<i>Plaintiff,</i>	)	Civil Action No. 2:19-cv-12648-DML-RSW
)	
v.)	
)	
	)	Hon. David M. Lawson
Relief Physical Therapy & Rehab, Inc. d/b/a Relief Rehab, et al.)	
)	
<i>Defendant.</i>)	

SUMMONS IN A CIVIL ACTION

To: Hussien Awada
507 Terrace Cove Way
Orlando, FL 32828

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Jacquelyn A. McEttrick, Esq., Smith & Brink, P.C., 350 Granite St., Suite 2303, Braintree, MA 02184

If you fail to respond, judgment by default may be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

DAVID J. WEAVER, CLERK OF COURT

By: _____
Signature of Clerk or Deputy Clerk

Date of Issuance: _____



Summons and Complaint Return of Service

Case No.
Hon.

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

This summons for *(name of individual and title, if any)* _____
was received by me on *(date)* _____.

☐ I personally served the summons on the individual at *(place)* _____
_____ on *(date)* _____; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* _____
_____, a person of suitable age and discretion who resides there,
on *(date)* _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* _____, who is
designated by law to accept service of process on behalf of *(name of organization)* _____
_____ on *(date)* _____; or

☐ I returned the summons unexecuted because _____; or

☐ Other *(specify)*: _____
_____.

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ _____.

I declare under penalty of perjury that this information is true.

Date: _____

Server's signature

Printed name and title

Server's address

Additional information regarding attempted service, etc:

UNITED STATES DISTRICT COURT
for the
Eastern District of Michigan

Liberty Mutual Fire Insurance Company, et al.)	
)	
<i>Plaintiff,</i>	)	Civil Action No. 2:19-cv-12648-DML-RSW
)	
v.)	
)	
	)	Hon. David M. Lawson
Relief Physical Therapy & Rehab, Inc. d/b/a Relief Rehab, et al.)	
)	
<i>Defendant.</i>)	

SUMMONS IN A CIVIL ACTION

To: Imad Awada
7455 Greenfield Rd.
Detroit, MI 48228

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Jacquelyn A. McEttrick, Esq., Smith & Brink, P.C., 350 Granite St., Suite 2303, Braintree, MA 02184

If you fail to respond, judgment by default may be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

DAVID J. WEAVER, CLERK OF COURT

By: _____
Signature of Clerk or Deputy Clerk

Date of Issuance: _____



Summons and Complaint Return of Service

Case No.
Hon.

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

This summons for *(name of individual and title, if any)* _____
was received by me on *(date)* _____.

☐ I personally served the summons on the individual at *(place)* _____
_____ on *(date)* _____; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* _____
_____, a person of suitable age and discretion who resides there,
on *(date)* _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* _____, who is
designated by law to accept service of process on behalf of *(name of organization)* _____
_____ on *(date)* _____; or

☐ I returned the summons unexecuted because _____; or

☐ Other *(specify)*: _____
_____.

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ _____.

I declare under penalty of perjury that this information is true.

Date: _____

Server's signature

Printed name and title

Server's address

Additional information regarding attempted service, etc:

UNITED STATES DISTRICT COURT
for the
Eastern District of Michigan

Liberty Mutual Fire Insurance Company, et al.)	
)	
<i>Plaintiff,</i>	)	Civil Action No. 2:19-cv-12648-DML-RSW
)	
v.)	
)	
	)	Hon. David M. Lawson
Relief Physical Therapy & Rehab, Inc. d/b/a Relief Rehab, et al.)	
)	
<i>Defendant.</i>)	

SUMMONS IN A CIVIL ACTION

To: Joseph Awada
7001 Wyoming, Suite 8
Dearborn, MI 48126

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Jacquelyn A. McEttrick, Esq., Smith & Brink, P.C., 350 Granite St., Suite 2303, Braintree, MA 02184

If you fail to respond, judgment by default may be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

DAVID J. WEAVER, CLERK OF COURT

By: _____
Signature of Clerk or Deputy Clerk

Date of Issuance: _____



Summons and Complaint Return of Service

Case No.
Hon.

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

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☐ I personally served the summons on the individual at *(place)* _____
_____ on *(date)* _____; or

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on *(date)* _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* _____, who is
designated by law to accept service of process on behalf of *(name of organization)* _____
_____ on *(date)* _____; or

☐ I returned the summons unexecuted because _____; or

☐ Other *(specify)*: _____
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My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ _____.

I declare under penalty of perjury that this information is true.

Date: _____

Server's signature

Printed name and title

Server's address

Additional information regarding attempted service, etc:

UNITED STATES DISTRICT COURT
for the
Eastern District of Michigan

Liberty Mutual Fire Insurance Company, et al.)	
)	
<i>Plaintiff,</i>	)	Civil Action No. 2:19-cv-12648-DML-RSW
)	
v.)	
)	
	)	Hon. David M. Lawson
Relief Physical Therapy & Rehab, Inc. d/b/a Relief Rehab, et al.)	
)	
<i>Defendant.</i>)	

SUMMONS IN A CIVIL ACTION

To: Lawrence Atat
12830 Ford Rd.
Dearborn, MI 48126

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Jacquelyn A. McEttrick, Esq., Smith & Brink, P.C., 350 Granite St., Suite 2303, Braintree, MA 02184

If you fail to respond, judgment by default may be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

DAVID J. WEAVER, CLERK OF COURT

By: _____
Signature of Clerk or Deputy Clerk

Date of Issuance: _____



Summons and Complaint Return of Service

Case No.
Hon.

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☐ I left the summons at the individual's residence or usual place of abode with *(name)* _____
_____, a person of suitable age and discretion who resides there,
on *(date)* _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* _____, who is
designated by law to accept service of process on behalf of *(name of organization)* _____
_____ on *(date)* _____; or

☐ I returned the summons unexecuted because _____; or

☐ Other *(specify)*: _____
_____.

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ _____.

I declare under penalty of perjury that this information is true.

Date: _____

Server's signature

Printed name and title

Server's address

Additional information regarding attempted service, etc:

UNITED STATES DISTRICT COURT
for the
Eastern District of Michigan

Liberty Mutual Fire Insurance Company, et al.)	
)	
<i>Plaintiff,</i>	)	Civil Action No. 2:19-cv-12648-DML-RSW
)	
v.)	
)	
	)	Hon. David M. Lawson
Relief Physical Therapy & Rehab, Inc. d/b/a Relief Rehab, et al.)	
)	
<i>Defendant.</i>)	

SUMMONS IN A CIVIL ACTION

To: Magdalene Awada
1911 Hawthorne St.
Dearborn, MI 48128

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Jacquelyn A. McEttrick, Esq., Smith & Brink, P.C., 350 Granite St., Suite 2303, Braintree, MA 02184

If you fail to respond, judgment by default may be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

DAVID J. WEAVER, CLERK OF COURT

By: _____
Signature of Clerk or Deputy Clerk

Date of Issuance: _____



Summons and Complaint Return of Service

Case No.
Hon.

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

This summons for *(name of individual and title, if any)* _____
was received by me on *(date)* _____.

☐ I personally served the summons on the individual at *(place)* _____
_____ on *(date)* _____; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* _____
_____, a person of suitable age and discretion who resides there,
on *(date)* _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* _____, who is
designated by law to accept service of process on behalf of *(name of organization)* _____
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☐ I returned the summons unexecuted because _____; or

☐ Other *(specify)*: _____
_____.

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ _____.

I declare under penalty of perjury that this information is true.

Date: _____

Server's signature

Printed name and title

Server's address

Additional information regarding attempted service, etc:

UNITED STATES DISTRICT COURT
for the
Eastern District of Michigan

Liberty Mutual Fire Insurance Company, et al.)	
)	
<i>Plaintiff,</i>	)	Civil Action No. 2:19-cv-12648-DML-RSW
)	
v.)	
)	
	)	Hon. David M. Lawson
Relief Physical Therapy & Rehab, Inc. d/b/a Relief Rehab, et al.)	
)	
<i>Defendant.</i>)	

SUMMONS IN A CIVIL ACTION

To: Mahmoud Awada
5214 Curtis St.
Dearborn, MI 48126

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Jacquelyn A. McEttrick, Esq., Smith & Brink, P.C., 350 Granite St., Suite 2303, Braintree, MA 02184

If you fail to respond, judgment by default may be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

DAVID J. WEAVER, CLERK OF COURT

By: _____
Signature of Clerk or Deputy Clerk

Date of Issuance: _____



Summons and Complaint Return of Service

Case No.
Hon.

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This summons for *(name of individual and title, if any)* _____
was received by me on *(date)* _____.

☐ I personally served the summons on the individual at *(place)* _____
_____ on *(date)* _____; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* _____
_____, a person of suitable age and discretion who resides there,
on *(date)* _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* _____, who is
designated by law to accept service of process on behalf of *(name of organization)* _____
_____ on *(date)* _____; or

☐ I returned the summons unexecuted because _____; or

☐ Other *(specify)*: _____
_____.

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ _____.

I declare under penalty of perjury that this information is true.

Date: _____

Server's signature

Printed name and title

Server's address

Additional information regarding attempted service, etc:

UNITED STATES DISTRICT COURT
for the
Eastern District of Michigan

Liberty Mutual Fire Insurance Company, et al.)	
)	
<i>Plaintiff,</i>	)	Civil Action No. 2:19-cv-12648-DML-RSW
)	
v.)	
)	
	)	Hon. David M. Lawson
Relief Physical Therapy & Rehab, Inc. d/b/a Relief Rehab, et al.)	
)	
<i>Defendant.</i>)	

SUMMONS IN A CIVIL ACTION

To: Mohamed Cheikh
7312 Middlepointe St., Apt. 1
Dearborn, MI 48126

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Jacquelyn A. McEttrick, Esq., Smith & Brink, P.C., 350 Granite St., Suite 2303, Braintree, MA 02184

If you fail to respond, judgment by default may be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

DAVID J. WEAVER, CLERK OF COURT

By: _____
Signature of Clerk or Deputy Clerk

Date of Issuance: _____



Summons and Complaint Return of Service

Case No.
Hon.

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

This summons for *(name of individual and title, if any)* _____
was received by me on *(date)* _____.

☐ I personally served the summons on the individual at *(place)* _____
_____ on *(date)* _____; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* _____
_____, a person of suitable age and discretion who resides there,
on *(date)* _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* _____, who is
designated by law to accept service of process on behalf of *(name of organization)* _____
_____ on *(date)* _____; or

☐ I returned the summons unexecuted because _____; or

☐ Other *(specify)*: _____
_____.

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ _____.

I declare under penalty of perjury that this information is true.

Date: _____

Server's signature

Printed name and title

Server's address

Additional information regarding attempted service, etc:

UNITED STATES DISTRICT COURT
for the
Eastern District of Michigan

Liberty Mutual Fire Insurance Company, et al.)	
)	
<i>Plaintiff,</i>	)	Civil Action No. 2:19-cv-12648-DML-RSW
)	
v.)	
)	
Relief Physical Therapy & Rehab, Inc. d/b/a Relief Rehab, et al.	)	Hon. David M. Lawson
)	
<i>Defendant.</i>)	

SUMMONS IN A CIVIL ACTION

To: Orthopedic Medical Supplies 1 Ltd.
c/o Ameer Awada, Registered Agent
8535 Gary Street, Dearborn, MI 48126

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Jacquelyn A. McEttrick, Esq., Smith & Brink, P.C., 350 Granite St., Suite 2303, Braintree, MA 02184

If you fail to respond, judgment by default may be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

DAVID J. WEAVER, CLERK OF COURT

By: _____
Signature of Clerk or Deputy Clerk

Date of Issuance: _____



Summons and Complaint Return of Service

Case No.
Hon.

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

This summons for *(name of individual and title, if any)* _____
was received by me on *(date)* _____.

☐ I personally served the summons on the individual at *(place)* _____
_____ on *(date)* _____; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* _____
_____, a person of suitable age and discretion who resides there,
on *(date)* _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* _____, who is
designated by law to accept service of process on behalf of *(name of organization)* _____
_____ on *(date)* _____; or

☐ I returned the summons unexecuted because _____; or

☐ Other *(specify)*: _____
_____.

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ _____.

I declare under penalty of perjury that this information is true.

Date: _____

Server's signature

Printed name and title

Server's address

Additional information regarding attempted service, etc:

UNITED STATES DISTRICT COURT
for the
Eastern District of Michigan

Liberty Mutual Fire Insurance Company, et al.)	
)	
<i>Plaintiff,</i>	)	Civil Action No. 2:19-cv-12648-DML-RSW
)	
v.)	
)	
	)	Hon. David M. Lawson
Relief Physical Therapy & Rehab, Inc. d/b/a Relief Rehab, et al.)	
)	
<i>Defendant.</i>)	

SUMMONS IN A CIVIL ACTION

To: Relief Physical Therapy & Rehab, Inc. d/b/a Relief Rehab
c/o Joseph Awada, Registered Agent
7001 Wyoming, Suite 8, Dearborn, MI 48126

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Jacquelyn A. McEttrick, Esq., Smith & Brink, P.C., 350 Granite St., Suite 2303, Braintree, MA 02184

If you fail to respond, judgment by default may be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

DAVID J. WEAVER, CLERK OF COURT

By: _____
Signature of Clerk or Deputy Clerk

Date of Issuance: _____



Summons and Complaint Return of Service

Case No.
Hon.

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

This summons for *(name of individual and title, if any)* _____
was received by me on *(date)* _____.

☐ I personally served the summons on the individual at *(place)* _____
_____ on *(date)* _____; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* _____
_____, a person of suitable age and discretion who resides there,
on *(date)* _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* _____, who is
designated by law to accept service of process on behalf of *(name of organization)* _____
_____ on *(date)* _____; or

☐ I returned the summons unexecuted because _____; or

☐ Other *(specify)*: _____
_____.

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ _____.

I declare under penalty of perjury that this information is true.

Date: _____

Server's signature

Printed name and title

Server's address

Additional information regarding attempted service, etc:

UNITED STATES DISTRICT COURT
for the
Eastern District of Michigan

Liberty Mutual Fire Insurance Company, et al.)	
)	
<i>Plaintiff,</i>	)	Civil Action No. 2:19-cv-12648-DML-RSW
)	
v.)	
)	
	)	Hon. David M. Lawson
Relief Physical Therapy & Rehab, Inc. d/b/a Relief Rehab, et al.)	
)	
<i>Defendant.</i>)	

SUMMONS IN A CIVIL ACTION

To: Steven Awada
22644 Michigan Ave.
Dearborn, MI 48124

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Jacquelyn A. McEttrick, Esq., Smith & Brink, P.C., 350 Granite St., Suite 2303, Braintree, MA 02184

If you fail to respond, judgment by default may be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

DAVID J. WEAVER, CLERK OF COURT

By: _____
Signature of Clerk or Deputy Clerk

Date of Issuance: _____



Summons and Complaint Return of Service

Case No.
Hon.

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

This summons for *(name of individual and title, if any)* _____
was received by me on *(date)* _____.

☐ I personally served the summons on the individual at *(place)* _____
_____ on *(date)* _____; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* _____
_____, a person of suitable age and discretion who resides there,
on *(date)* _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* _____, who is
designated by law to accept service of process on behalf of *(name of organization)* _____
_____ on *(date)* _____; or

☐ I returned the summons unexecuted because _____; or

☐ Other *(specify)*: _____
_____.

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ _____.

I declare under penalty of perjury that this information is true.

Date: _____

Server's signature

Printed name and title

Server's address

Additional information regarding attempted service, etc:

UNITED STATES DISTRICT COURT
for the
Eastern District of Michigan

Liberty Mutual Fire Insurance Company, et al.)	
)	
<i>Plaintiff,</i>	)	Civil Action No. 2:19-cv-12648-DML-RSW
)	
v.)	
)	
	)	Hon. David M. Lawson
Relief Physical Therapy & Rehab, Inc. d/b/a Relief Rehab, et al.)	
)	
<i>Defendant.</i>)	

SUMMONS IN A CIVIL ACTION

To: Steve's Medical Supply, Inc.
c/o Steven Awada, Registered Agent
22644 Michigan Ave. Dearborn, MI 48124

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Jacquelyn A. McEttrick, Esq., Smith & Brink, P.C., 350 Granite St., Suite 2303, Braintree, MA 02184

If you fail to respond, judgment by default may be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

DAVID J. WEAVER, CLERK OF COURT

By: _____
Signature of Clerk or Deputy Clerk

Date of Issuance: _____



Summons and Complaint Return of Service

Case No.
Hon.

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

This summons for *(name of individual and title, if any)* _____
was received by me on *(date)* _____.

☐ I personally served the summons on the individual at *(place)* _____
_____ on *(date)* _____; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* _____
_____, a person of suitable age and discretion who resides there,
on *(date)* _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* _____, who is
designated by law to accept service of process on behalf of *(name of organization)* _____
_____ on *(date)* _____; or

☐ I returned the summons unexecuted because _____; or

☐ Other *(specify)*: _____
_____.

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ _____.

I declare under penalty of perjury that this information is true.

Date: _____

Server's signature

Printed name and title

Server's address

Additional information regarding attempted service, etc:

UNITED STATES DISTRICT COURT
for the
Eastern District of Michigan

Liberty Mutual Fire Insurance Company, et al.)	
)	
<i>Plaintiff,</i>	)	Civil Action No. 2:19-cv-12648-DML-RSW
)	
v.)	
)	
	)	Hon. David M. Lawson
Relief Physical Therapy & Rehab, Inc. d/b/a Relief Rehab, et al.)	
)	
<i>Defendant.</i>)	

SUMMONS IN A CIVIL ACTION

To: United Transportation 1 Inc.
c/o Mahmoud Awada, Registered Agent
5214 Curtis St. Dearborn, MI 48126

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Jacquelyn A. McEttrick, Esq., Smith & Brink, P.C., 350 Granite St., Suite 2303, Braintree, MA 02184

If you fail to respond, judgment by default may be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

DAVID J. WEAVER, CLERK OF COURT

By: _____
Signature of Clerk or Deputy Clerk

Date of Issuance: _____



Summons and Complaint Return of Service

Case No.
Hon.

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

This summons for *(name of individual and title, if any)* _____
was received by me on *(date)* _____.

☐ I personally served the summons on the individual at *(place)* _____
_____ on *(date)* _____; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* _____
_____, a person of suitable age and discretion who resides there,
on *(date)* _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* _____, who is
designated by law to accept service of process on behalf of *(name of organization)* _____
_____ on *(date)* _____; or

☐ I returned the summons unexecuted because _____; or

☐ Other *(specify)*: _____
_____.

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ _____.

I declare under penalty of perjury that this information is true.

Date: _____

Server's signature

Printed name and title

Server's address

Additional information regarding attempted service, etc:

UNITED STATES DISTRICT COURT
for the
Eastern District of Michigan

Liberty Mutual Fire Insurance Company, et al.)	
)	
<i>Plaintiff,</i>	)	Civil Action No. 2:19-cv-12648-DML-RSW
)	
v.)	
)	
	)	Hon. David M. Lawson
Relief Physical Therapy & Rehab, Inc. d/b/a Relief Rehab, et al.)	
)	
<i>Defendant.</i>)	

SUMMONS IN A CIVIL ACTION

To: Vivid Rehab Inc.
c/o Lawrence Atat, Registered Agent
12830 Ford Rd., Dearborn, MI 48126

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Jacquelyn A. McEttrick, Esq., Smith & Brink, P.C., 350 Granite St., Suite 2303, Braintree, MA 02184

If you fail to respond, judgment by default may be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

DAVID J. WEAVER, CLERK OF COURT

By: _____
Signature of Clerk or Deputy Clerk

Date of Issuance: _____



Summons and Complaint Return of Service

Case No.
Hon.

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

This summons for *(name of individual and title, if any)* _____
was received by me on *(date)* _____.

☐ I personally served the summons on the individual at *(place)* _____
_____ on *(date)* _____; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* _____
_____, a person of suitable age and discretion who resides there,
on *(date)* _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* _____, who is
designated by law to accept service of process on behalf of *(name of organization)* _____
_____ on *(date)* _____; or

☐ I returned the summons unexecuted because _____; or

☐ Other *(specify)*: _____
_____.

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ _____.

I declare under penalty of perjury that this information is true.

Date: _____

Server's signature

Printed name and title

Server's address

Additional information regarding attempted service, etc:

UNITED STATES DISTRICT COURT
for the
Eastern District of Michigan

Liberty Mutual Fire Insurance Company, et al.)	
)	
<i>Plaintiff,</i>	)	Civil Action No. 2:19-cv-12648-DML-RSW
)	
v.)	
)	
	)	Hon. David M. Lawson
Relief Physical Therapy & Rehab, Inc. d/b/a Relief Rehab, et al.)	
)	
<i>Defendant.</i>)	

SUMMONS IN A CIVIL ACTION

To: Westborn Physical Therapy, LLC
c/o Steven Awada, Registered Agent
22644 Michigan Ave. Dearborn, MI 48124

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Jacquelyn A. McEttrick, Esq., Smith & Brink, P.C., 350 Granite St., Suite 2303, Braintree, MA 02184

If you fail to respond, judgment by default may be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

DAVID J. WEAVER, CLERK OF COURT

By: _____
Signature of Clerk or Deputy Clerk

Date of Issuance: _____



Summons and Complaint Return of Service

Case No.
Hon.

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

This summons for *(name of individual and title, if any)* _____
was received by me on *(date)* _____.

☐ I personally served the summons on the individual at *(place)* _____
_____ on *(date)* _____; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* _____
_____, a person of suitable age and discretion who resides there,
on *(date)* _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* _____, who is
designated by law to accept service of process on behalf of *(name of organization)* _____
_____ on *(date)* _____; or

☐ I returned the summons unexecuted because _____; or

☐ Other *(specify)*: _____
_____.

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ _____.

I declare under penalty of perjury that this information is true.

Date: _____

Server's signature

Printed name and title

Server's address

Additional information regarding attempted service, etc: